Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| porte to a consciusit of the sittle | and it diffices it displaye a valie cities                   |
|-------------------------------------|--------------------------------------------------------------|
| Attorney Docket No.                 | N0178 US                                                     |
| First Inventor                      | NATESAN                                                      |
| Title                               | Navigation System with Distributes<br>Computing Lychitecture |
| Express Mail Label No.              | ER 022547080                                                 |

| See MPEP c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | APPLICATION ELEMENTS hapter 600 concerning utility patent application contents.                                                                                                                                                                                                                                                                                          | Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--|--|--|--|--|--|
| 2.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ed arrangement set forth below) ptive title of the invention Reference to Related Applications nent Regarding Fed sponsored R & D ince to sequence listing, a table, imputer program listing appendix round of the Invention summary of the Invention bescription of the Drawings (if filed) ad Description s) ct of the Disclosure  g(s) (35 U.S.C. 113) [Total Sheets] | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  Other: |                          |  |  |  |  |  |  |
| 18. If a CONTIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | NUING APPLICATION, check appropriate box, and supowing the title, or in an Application Data Sheet under 3                                                                                                                                                                                                                                                                | 7 CFR 1.76:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |  |  |  |  |  |  |
| Continuation  Divisional  Continuation-in-part (CIP)  of prior application No.: 09/838.094  Prior application information:  Examiner WAYNE AMSBORY  Art Unit: 2\7\  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. |                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 19. CORRESPON                                                                                                                                                                                                                                                                                                                                                            | DENCE ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | er Number: 37583                                                                                                                                                                                                                                                                                                                                                         | OR Corre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | espondence address below |  |  |  |  |  |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Navigation Technologies CorpL                                                                                                                                                                                                                                                                                                                                            | egăl Dept.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                          |  |  |  |  |  |  |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 222 Merchandise Mart Plaza<br>Suite 900                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                          |  |  |  |  |  |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Chicago,                                                                                                                                                                                                                                                                                                                                                                 | State IL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Zip Code 60654           |  |  |  |  |  |  |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | CDII                                                                                                                                                                                                                                                                                                                                                                     | elephone 312/894-7000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Fax 312/894-7228         |  |  |  |  |  |  |
| Name (Print/Typ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | De) Jon D. Shutter                                                                                                                                                                                                                                                                                                                                                       | Registration No. (Attorney/Agent)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 41,311                   |  |  |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Co-PSCuth                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date 11-25-0-3           |  |  |  |  |  |  |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| F FFF TDANCMITTAL                                                                                         |                                                |                                                     | Complete if Known |        |                                          |                                |                         |             |  |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------------|-------------------|--------|------------------------------------------|--------------------------------|-------------------------|-------------|--|
| FEE TRANSMITTA                                                                                            | ┖▐                                             | Application Number                                  |                   |        |                                          |                                |                         |             |  |
| F                                                                                                         |                                                |                                                     | Filing Date       |        |                                          |                                |                         |             |  |
| for FY 2004                                                                                               |                                                |                                                     |                   |        |                                          | ATES                           | AN                      |             |  |
| Effective 10/01/2003. Patent fees are subject to annual revision.                                         |                                                | Examiner Name                                       |                   |        |                                          |                                |                         |             |  |
| Applicant claims small entity status. See 37 CFR 1.27                                                     |                                                | Art Unit                                            |                   |        |                                          |                                |                         |             |  |
| TOTAL AMOUNT OF PAYMENT (\$)                                                                              | ı                                              | Attorney Docket No. NO178 US                        |                   |        |                                          |                                | 8115                    | <del></del> |  |
|                                                                                                           |                                                |                                                     |                   |        |                                          |                                |                         |             |  |
| METHOD OF PAYMENT (check all that apply)                                                                  | FEE CALCULATION (continued)                    |                                                     |                   |        |                                          |                                |                         |             |  |
| Check Credit card Money Other None                                                                        | 3. ADDITIONAL FEES Large Entity   Small Entity |                                                     |                   |        |                                          |                                |                         |             |  |
| ☐ ☑ Deposit Account:                                                                                      |                                                |                                                     |                   | Fee    | Fee I                                    | Description                    |                         |             |  |
| Depositi Account 50 0728                                                                                  |                                                |                                                     | Code              | • •    |                                          | •                              |                         | Fee Paid    |  |
| Number<br>Deposit                                                                                         |                                                | 130<br>50                                           | 2051<br>2052      |        | Surcharge - late<br>Surcharge - late     |                                |                         |             |  |
| Account Navigation Technologies                                                                           | 1052                                           |                                                     |                   |        | cover sheet                              |                                | 100 01                  |             |  |
| The Director is authorized to: (check all that apply)                                                     | 1053                                           |                                                     | 1053              |        | Non-English spe                          |                                | te reexamination        |             |  |
| Charge fee(s) indicated below Credit any overpayments                                                     | 1812                                           | 2,520<br>920*                                       | 1812 2<br>1804    |        | Requesting publ                          |                                |                         |             |  |
| Charge any additional fee(s) or any underpayment of fee(s)                                                | 1004                                           | 520                                                 | 1004              | 320    | Examiner action                          |                                | ( prior to              | <b>├</b>    |  |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.         | 1805                                           | 1,840*                                              | 1805              | 1,840* | Requesting pub<br>Examiner action        |                                | R after                 |             |  |
| FEE CALCULATION                                                                                           | 1251                                           | 110                                                 | 2251              | 55     | Extension for re                         | ply within firs                | st month                | <u> </u>    |  |
| 1. BASIC FILING FEE                                                                                       | 1252                                           | 420                                                 | 2252              | 210    | Extension for re                         | epty within se                 | cond month              |             |  |
| Large Entity Small Entity                                                                                 | 1253                                           | 950                                                 | 2253              | 475    | Extension for re                         | eply within thi                | rd month                |             |  |
| Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)                                              | 1254                                           | 1,480                                               | 2254              |        | Extension for re                         |                                |                         |             |  |
| 1001 770 2001 385 Utility filing fee                                                                      | 1255                                           | 2,010                                               | 2255              | 1,005  | Extension for re                         | eply within fift               | h month                 |             |  |
| 1002 340 2002 170 Design filing fee                                                                       | 1401                                           |                                                     | 2401              | 165    | Notice of Appea                          | al                             |                         |             |  |
| 1003 530 2003 265 Plant filing fee                                                                        | 1402                                           |                                                     | 2402              |        | Filing a brief in                        |                                | appeal                  |             |  |
| 1004 770 2004 385 Reissue filing fee                                                                      | 1403                                           |                                                     | 2403              |        | Request for ora                          | -                              |                         | <b>—</b>    |  |
| 1005 160 2005 80 Provisional filing fee                                                                   | 1451                                           | 1,510                                               | 1451<br>2452      |        | Petition to institute Petition to revive | •                              |                         |             |  |
| SUBTOTAL (1) (\$) 770                                                                                     |                                                | 1,330                                               | 2452              |        | Petition to reviv                        |                                |                         |             |  |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE                                                               |                                                | 1,330                                               | 2501              |        | Utility issue fee                        |                                | nia:                    |             |  |
| Fee from<br>Ext <u>ra Claims below Fee Paid</u>                                                           |                                                | •                                                   | 2502              |        | Design issue fe                          | •                              |                         |             |  |
| Total Claims 4 -20** = X                                                                                  | 1503                                           | 640                                                 | 2503              | 320    | Plant issue fee                          |                                |                         |             |  |
| Independent 3 - 3** = X = -                                                                               | 1460                                           | 130                                                 | 1460              | 130    | Petitions to the                         | Commission                     | er                      |             |  |
| Multiple Dependent                                                                                        | 1807                                           | 50                                                  | 1807              |        | Processing fee                           |                                |                         |             |  |
| Large Entity   Small Entity Fee Fee   Fee Fee Fee Description                                             | 1806                                           | 180                                                 | 1806              |        | Submission of I                          |                                |                         |             |  |
| Code (\$)                                                                                                 | 8021                                           | 40                                                  | 8021              | 40     | Recording each<br>property (times        | n patent assig<br>number of pr | nment per<br>roperties) |             |  |
| 1202 18 2202 9 Claims in excess of 20                                                                     | 1809                                           | 770                                                 | 2809              | 385    | Filing a submis                          | sion after fina                | • •                     |             |  |
| 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid | 1810                                           | 770                                                 | 2810              | 285    | (37 CFR 1.129)<br>For each addition      |                                | n to be                 |             |  |
| 1204 86 2204 43 ** Reissue independent claims                                                             | '6'                                            | , ,,,                                               | 20.0              | , JUS  | examined (37 C                           | CFR 1.129(b)                   | )                       |             |  |
| over original patent                                                                                      | 180                                            |                                                     | 2801              |        | Request for Co                           |                                | •                       |             |  |
| 1205 18 2205 9 ** Reissue daims in excess of 20 and over original patent                                  | 1802                                           | 2 900                                               | 1802              | 900    | Request for ex<br>of a design app        |                                | mination                |             |  |
| SUBTOTAL (2) (\$)                                                                                         | 1                                              | er fee (sp                                          |                   |        |                                          |                                |                         |             |  |
| **or number previously paid, if greater; For Reissues, see above                                          | *Rec                                           | *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) |                   |        |                                          |                                |                         |             |  |
| SUBMITTED BY (Complete (4'apptica:10))                                                                    |                                                |                                                     |                   |        |                                          |                                |                         |             |  |
| Name (Print/Type)  Jon D. Shutter  Registration No. (Attorney/Agent)  41,311  Telephone 312/89            |                                                |                                                     |                   |        |                                          |                                | 000                     |             |  |
| Signature S. P. Shutte                                                                                    |                                                | IAllomey                                            | (Agent)           | 4      | 1,011                                    | Date                           | 1\-25-0                 |             |  |
| Signature Port Control                                                                                    |                                                |                                                     |                   |        |                                          |                                |                         |             |  |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.